Title of Intervention: Empowerment: Facilitating a Path to Personal Self-Care

Intervention Strategies: Group Education

Purpose of the Intervention: To improve psychosocial self-efficacy and attitudes toward diabetes to reduce

blood glucose levels

Population: Graduates of the diabetes outpatient education program

Setting: University of Michigan Medical Center; health care facility-based

Partners: None mentioned

Intervention Description:

• Group Education: The intervention group received a six-session (one session per week) patient empowerment education program; the control group was assigned to a wait-list. At the end of 6 weeks, the control group completed the six-session empowerment program. Each session involved a brief presentation of key concepts related to the topic, completion of individual assessment and planning worksheet responses and insights. The program, "Empowerment: Facilitating a Path to Personal Self-Care," was designed to enhance the ability of patients to identify and set realistic goals, apply a systematic problem-solving process to eliminate barriers to achieving those goals, cope with circumstances that cannot be changed, manage the stress caused by living with diabetes, as well as the general stress of daily life, identify and obtain appropriate social support and improve their ability to be self-motivated.

Theory: Not mentioned

Resources Required:

Staff/Volunteers: Not mentioned

Training: Not mentionedTechnology: Not mentioned

Space: Room to conduct group education sessions

• Budget: Not mentioned

Intervention: Empowerment program

Evaluation: Questionnaire, blood draw instruments and analysis

Evaluation:

- Design: Randomized wait-listed controlled trial
- Methods and Measures:
 - Questionnaires measured the respondents' perceived ability to: 1) identify areas of satisfaction and dissatisfaction related to living with diabetes, 2) identify and achieve personally meaningful goals, 3) apply a systematic problem-solving process to the elimination of barriers to their goals, 4) cope with the emotional aspects of living with diabetes, 5) manage stress, 6)attain appropriate social support, 7) be self motivated and 8) make cost/benefit decisions about making behavior changes related to living with diabetes.
 - A blood sample was drawn to measure glycated hemoglobin assay.

Outcomes:

Short Term Impact: The intervention group showed gains over the control group on four of the eight self efficacy scales: assessing satisfaction, setting goals, solving problems and emotional coping. The intervention group also showed a significant decline in negative attitude toward living with diabetes. A modest improvement was indicated in attitude concerning the impact of diabetes on quality of life among the intervention group. Within-group analyses for self-efficacy indicated that the program resulted in significant improvements in all self-efficacy areas, which were sustained at follow-up. Improvements in attitudes were also sustained at follow-up.

 Long Term Impact: The intervention group showed a significantly greater reduction in glycated hemoglobin than the control group. A modest improvement in blood glucose was seen in the intervention group.

Maintenance: A follow-up session allowed participants to discuss their experiences during the 6-week follow-up period and view a one-hour videotape, reviewing the empowerment philosophy and program content.

Lessons Learned: In an ideal setting, patient education would equally address blood glucose management and the psychosocial challenges of living with diabetes. Patient empowerment should not be viewed as competing with traditional diabetes patient education. It is instead a complementary and reinforcing component of such education. Efforts to educate, support and encourage patients should be ongoing.

Citation(s):

Anderson RM, Funnell MM, Butler PM, Arnold MS, Fitzgerald JT, Feste CC. Patient empowerment. Results of a randomized controlled trial. Diabetes Care. Jul 1995;18(7):943-949.